REX	ISED	10/01

Individual_

Group____

Other_

PARTICIPANT'S 24-HOUR FOOD RECALL

1. ID#:		2. Date Taken:					
3. Participant Name:		4. NEA Name:					
5. Pregnant □ Yes □ No	5. Nursing	□ No		Nutritional Sup □ No If "Yes'	•		
8. Money Spent On Food Last Month (Include personal income and food assistance) (Be sure to include drinks, snacks, and meals eaten away from home):							
MEAL TYPE MEAL TYPE	SERVING ABBI	REVIATION	NS 9. (Check Which F	ood Record:		
Morning = 1 Afternoon = 4 Midmorning = 2 Evening = 5 Noon = 3 Late Evening = 6	TBSP = tablespoor tsp = teaspoon oz = ounce fl oz = fluid ounce	on $c = cup$ $lb = pc$ $sl = slice$	ound	 □ ENTRY I □ 2ND REC □ 3RD REC □ EXIT RE 	RECALL ALL ALL		
	CONVERSIO	N TABLE		L EXII KE	CALL		
	$ \begin{array}{ccc} 2 \text{ TBSP} &= 1 \text{ fl} \\ 4 \text{ TBSP} &= \frac{1}{4} \text{ c} \end{array} $	oz ½ pint : 1 liter : 1 quart	= 1 c = 4 c	1 c (liquid) = $1 \text{ dash} = \frac{1}{8} \text{ ts}$ 30 drops = $\frac{1}{2}$ 16 oz. = 1 lb	p tsp		
10. What did participant eat and drink in the last 24 hours (To be filled out by NEA)			rs? 11. To Be Coded By NEA:				
FOOD ITEMS AND DESCE (List all foods and bever List separately main ingredients in r are not in food dictiona	ages. nixed dishes that	AMOUNT EATEN	T MEAI		AMOUNT EATEN (IN FOOD DICTIONARY UNITS)		
					•		
					•		
					•		
					•		
12. Number of Lessons Taught Since	Last Record:				Continue		

FOOD ITEMS AND DESCRIPTION (List all foods and beverages. List separately main ingredients in mixed dishes that are not in food dictionary.)	AMOUNT EATEN	MEAL TYPE	FOOD ID NUMBER	AMOUNT EATEN (IN FOOD DICTIONARY UNITS)
				•
				•
				•
				•
				•
				•